



pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION
NORTHWEST REGIONAL OFFICE

October 19, 2011

Steve Sherk
American Refining Group
77 North Kendall Avenue
Bradford, PA 16701

RECEIVED
EPA REG

MAR 12 2012

NPDES PERMIT
(3WP41)

Re: Acceptance/Administrative Completeness Letter
American Refining Group – Bradford Refinery
Application No. PA0002674
Permit Amendment
City of Bradford, McKean County

Dear Mr. Sherk:

On October 17, 2011, the Department of Environmental Protection (DEP) received the above-referenced application. We have determined that the application contains the necessary documents and is administratively complete.

The administrative completeness review is the first in a series of reviews conducted by DEP. To help you better understand the application review process, a brief explanation of the permit application review process and approximate times are outlined on the enclosed Permit Application Review Process Fact Sheet.

Your permit application is eligible for DEP's Money-Back Guarantee Program. The program establishes that your NPDES Permit applications must be acted on within 180 days or the application fee will be returned. The program is explained in more detail on the enclosed Fact Sheet.

I hope you find this information helpful in understanding the application review process. If you have additional questions about your application, please contact me at the telephone number listed below and refer to APS No. 515658.

Sincerely,

Ellen Roberts
Clerical Supervisor 2
Water Management

Enclosures

cc: Richard Dodds/Hill Engineering
DEP Engineer
Monitoring & Compliance Specialists
File



HILL ENGINEERING, INC.

8 GIBSON STREET NORTH EAST, PENNSYLVANIA 16428

(814) 725-8659 FAX: (814) 725-3867

Registered Engineer - State of Pennsylvania

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MAR 12 2012

NPDES PERMITS BRANCH
(SWP41)

October 14, 2011

OCT 17 2011

Ms. Ruth Steel, Permits Clerk
PA Department of Environmental Protection
Bureau of Water Management
230 Chestnut Street
Meadville, PA 16335

Reference: NPDES Permit Amendment
Industrial Wastewater Treatment Plant Modifications
American Refining Group, Inc.
McKean County, PA

Dear Ms. Steel:

On behalf of the American Refining Group, Incorporated, we are enclosing one (1) original copy and two (2) copies of the NPDES Part I Permit Application to amend the existing discharge permit. Each application package includes the following:

- NPDES Permit Application
- General Information Form
- Topographic Map
- Act 14 Notifications
- Module 2
- Existing Flow Schematic
- Proposed Flow Schematic

A check for \$200 payable to the Commonwealth of Pennsylvania is enclosed to cover the application fee.

If you have any questions or require any additional information, please call me.

Sincerely,

HILL ENGINEERING, INC.

Richard B. Dodds

Enclosures

cc: American Refining Group, Inc. (w/encl.)



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NORTHWEST REGIONAL OFFICE

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MAR 12 2012

NPDES PERMITTING DIVISION
(610) 237-6000

DATE: 1/12/12

PROGRAM: _____

MEETING REGARDING: ARG

<u>NAME & TITLE</u>	<u>ORGANIZATION</u>	<u>PHONE NUMBER</u>
Rammy Halterman	DEP	332 6191 khalterman@pa.gov
ERIC GUSTAFSON	DEP	814-332-6613 egustafson@pa.gov
Phil Smith	DEP Compliance Spec.	332.6184 philsmith@pa.gov
DAVE BALOG	DEP-Permits (WQ)	814-332-6328 dbalog@pa.gov
Adam Pesek	DEP(WQ)	814-332-6831 apesek@pa.gov
SHANE REID-PROCESS ENGINEER	ARG	814-368-1774 sreid@amref.com
RICHARD KUCHARSKI - ENGINEERING MANAGER	ARG	(814) 368-1411 RKUCHARSKI@AMREF.COM
DON HEBURG	DEP	814 797 1191 dhebuge@pa.gov
Steve Sherk	ARG	814-368-1283 ssherk@amref.com
Jason Goodling	ARG	814-368-1223 jgoodling@amref.com
Dayne Crowley	Amec	412 279-6661 Dayne.Crowley@Amec.co



American Refining Group, Inc. 77 N. Kendall Ave., Bradford, PA 16701

Meeting: American Refining Group – Foster Brook Remediation and Out fall 006

Date: January 12, 2012

Pennsylvania Department of Environmental Protection and American Refining Group.

Agenda:

- I. Foster Brook Pump and Treat
 - a. Option 1. Conveyance system to Main Refinery
 - b. Option 2. Install WWTP at Foster Brook
 - c. PADEP approval for option 2.
 - i. Discharge at outfall 004
 - ii. WQM permit
 - d. Description of Pump and Treat system
 - i. Recovery well schedule
 - ii. Conveyance system
 - a) Pump year round
 - b) Pump April – Oct
 - c) PADEP concurrence
- II. Out fall 006
 - a. Summary of evaluation
 - b. Corrective action plan



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DEPARTMENT OF ENVIRONMENTAL PROTECTION

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATER STANDARDS AND FACILITY REGULATION

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MAR 12 2012

NPDES PERMIT SEARCH
(3WP41)

APPLICATION FOR NPDES PERMIT FOR INDUSTRIAL DISCHARGERS

APPLICANT'S ✓ CHECKLIST

APPLICANT NAME

American Refining Group

Please check the following list to make sure that you have included all the required information. Place a checkmark in the column provided for all items completed and/or provided.

Failure to provide all of the requested information will delay the processing of the application and may result in the application being placed on hold with no action, or will be considered withdrawn and the application file closed.

Item		Check If Included	DEP Use Only
1.	General Information Form (8000-PM-IT0001)	<input checked="" type="checkbox"/>	
2.	One original and (2) copies of application package submitted	<input checked="" type="checkbox"/>	
3.	Additional copy for Erie and Allegheny counties (if required)	<input type="checkbox"/>	
4.	Additional copy for the river basin commission (if required)	<input type="checkbox"/>	
5.	Application Fee: Amount Enclosed \$200	<input checked="" type="checkbox"/>	
6.	Proper evidence of Act 14 municipality and county notification	<input checked="" type="checkbox"/>	
7.	Proof of local newspaper public notice (for new and substantially changed discharges only)	<input type="checkbox"/>	
8.	Topographic Map	<input checked="" type="checkbox"/>	
9.	Industrial Wastewater - Module 1	<input type="checkbox"/>	
10.	Wastewater Treatment Technologies - Module 2	<input checked="" type="checkbox"/>	
11.	Sources Of Wastewater sheet(s) - Module 3	<input type="checkbox"/>	
12.	Analysis Results Table(s) - Modules 4-9	<input type="checkbox"/>	
13.	Hazardous Substance Table - Module 10	<input type="checkbox"/>	
14.	Toxic Chemicals (Optional) - Module 11	<input type="checkbox"/>	
15.	Stormwater (if required) - Module 12	<input type="checkbox"/>	
16.	Stormwater Sampling Data Table (if required) - Module 13	<input type="checkbox"/>	
17.	No Exposure Certification (if required) - Module 14	<input type="checkbox"/>	
18.	Other: _____	<input type="checkbox"/>	

COPY



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATER STANDARDS AND FACILITY REGULATION

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
APPLICATION FOR PERMIT TO DISCHARGE INDUSTRIAL WASTEWATER**

Before completing this form, read the step-by-step instructions provided in this application package.		
Client ID# _____ Site ID# _____ Facility ID# _____	Related ID#s (If Known) APS ID# _____ Auth ID# _____	<div style="border: 1px solid black; padding: 5px;"> DEP USE ONLY Date Received & General Notes <div style="color: red; font-weight: bold; font-size: 1.2em;">OCT 17 2011</div> </div>
APPLICANT IDENTIFIER		
Applicant/Operator Name American Refining Group, Inc.		
Is this an application for a: <input type="checkbox"/> New permit Complete the General Information Form (GIF) 8000-PM-IT0001 and attach to the front of the application. <input type="checkbox"/> Permit Renewal List the current NPDES Permit number PA _____ Complete the Client and Site Sections of the GIF and attach to the front of the application. <input checked="" type="checkbox"/> Permit Amendment or Permit Renewal with Amendment List the current NPDES Permit number <u>PAPA0002674</u> List the current WQM Permit number _____ Complete the GIF and attach to the front of the application.		Facility Category <i>(See application instructions for fees)</i> <input type="checkbox"/> Minor facility not covered by an ELG <input type="checkbox"/> Minor facility covered by an ELG <input type="checkbox"/> Major facility < 250 MGD <input type="checkbox"/> Major facility ≥ 250 MGD <input type="checkbox"/> Stormwater <input type="checkbox"/> CAAP <input type="checkbox"/> Minor amendment <input type="checkbox"/> Major amendment
GENERAL INFORMATION		
1. SIC Code	NAICS Code	Corresponding SIC/NAICS Description
2911		
2. Is the facility required to obtain a stormwater NPDES permit for any listed SIC code?	<input checked="" type="checkbox"/> YES (Answer question 3 below.) <input type="checkbox"/> NO (Skip question 3.)	
3. Is the facility applying for permit exemption under the No Exposure rule? (See Instructions)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
4. General Description and Nature of Business.		
Petroleum Refining		
5. List all NPDES and WQM Permits issued by DEP for this facility.		
Permit Type	Permit Number	Date Issued
NPDES	0002674	2010
WQM Part II	4202201	2004

6. ATTACH TOPOGRAPHIC MAP (See Instructions)

7. NUMBER OF OUTFALLS

a. Industrial Wastewater Only	2	Complete Module 1 and associated Modules.
b. Combined Industrial Wastewater and Stormwater		Complete Module 1, associated Modules and Module 12 or Module 14 (if required).
c. Stormwater Only	6	Complete Module 12 or Module 14.

8. NON STORMWATER RELATED OUTFALL LOCATIONS (outfalls that do not receive stormwater). Using the same Locational Data supplied on the General Information Form under Facility Information, list the latitude and longitude of the location to the nearest ten-thousandth of a second and the name of the receiving water for each outfall. Where available, the receiving stream width and depth should also be provided using actual measurements or topographic map and navigational charts. Attach additional pages as necessary.

OUTFALL NUMBER (list)	LATITUDE			LONGITUDE			DESIGN FLOW (MGD)	RECEIVING WATER (Name)	LOW FLOW STREAM	
	Deg	Min	Sec	Deg	Min	Sec			Width (ft)	Depth (ft)
002	41	57	56	78	38	05		Tunungwant	100	0.5
004	41	58	47	78	37	30		Tunungwant	100	0.5

9. STORMWATER RELATED OUTFALL LOCATIONS (outfalls that in whole or part receive stormwater). Attach additional pages as necessary.

OUTFALL NUMBER (list)	LATITUDE			LONGITUDE			DESIGN FLOW (MGD)	RECEIVING WATER (Name)	LOW FLOW STREAM	
	Deg	Min	Sec	Deg	Min	Sec			Width (ft)	Depth (ft)
see old appl.										

10. OTHER OUTFALL LOCATIONS (internal monitoring points and others not listed above). Attach additional pages as necessary.

OUTFALL NUMBER (list)	LATITUDE			LONGITUDE			DESIGN FLOW (MGD)	RECEIVING WATER (Name)	LOW FLOW STREAM	
	Deg	Min	Sec	Deg	Min	Sec			Width (ft)	Depth (ft)

11. Name of Nearest Downstream Potable Water Intake City of Warren Distance 63 miles

12. WHOLE EFFLUENT TOXICITY (WET) TEST RESULTS

Is there known or reason to believe that WET testing was conducted in the last 3 years on any of the facility's discharges, or on a receiving water in relation to a discharge?

☐ YES

☒ NO

If "YES," attach any information available on the purpose and nature of such testing, and the test results.
If "NO," all dischargers are still encouraged to perform WET testing. The DEP regional office may be contacted for appropriate protocols.

13. CONTRACTED ANALYTICAL ASSISTANCE

Did a contract laboratory or consulting firm perform any of the analysis required by this application?

☐ NO ☐ YES (Provide information below.)

Name		Types of Analysis Performed: No Sampling Required for Application Amendment
Address		
Phone	()	
Name		Types of Analysis Performed:
Address		
Phone	()	

14. ADDITIONAL INFORMATION: (OPTIONAL)

Additional information may be attached to expand upon any response to any questions or call attention to any other information felt should be considered in establishing permit limitations for the proposed or existing facility. Check if additional sheets are attached.

☐ YES ☒ NO

COMPLIANCE HISTORY REVIEW

Is the facility owner or operator in violation of any DEP regulation, permit, order or schedule of compliance at this or any other facility? ☐ YES ☒ NO

If "YES," list each permit, order and schedule of compliance and provide compliance status. Use additional sheets to provide information on all permits.

Permit Program	Permit No.
----------------	------------

Brief Description of Noncompliance

Steps Taken to Achieve Compliance

Date(s) Compliance Achieved

Current Compliance Status

☐ In Compliance

☐ In Noncompliance

CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Stephen L. Sherk

Vice President of Compliance

Name (type or print legibly)

Official Title

Stephen L. Sherk

10/7/11

Signature

Date

(Use corporate or professional seal as appropriate.)

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DEPARTMENT OF ENVIRONMENTAL PROTECTION

GENERAL INFORMATION FORM – AUTHORIZATION APPLICATION

Before completing this General Information Form (GIF), read the step-by-step instructions provided in this application package. This version of the General Information Form (GIF) must be completed and returned with any program-specific application being submitted to the Department.

Related ID#s (If Known)		DEP USE ONLY Date Received & General Notes
Client ID# 4211381	APS ID#	
Site ID#	Auth ID#	
Facility ID#		

CLIENT INFORMATION

DEP Client ID# 4211381	Client Type / Code PACOR			
Organization Name or Registered Fictitious Name American Refining Group, Inc.	Employer ID# (EIN) 22-2318612	Dun & Bradstreet ID# 09-713-3417		
Individual Last Name Sherk	First Name Steve	MI L	Suffix Mr.	SSN
Additional Individual Last Name	First Name	MI	Suffix	SSN
Mailing Address Line 1 77 North Kendall Avenue		Mailing Address Line 2		
Address Last Line – City Bradford	State PA	ZIP+4 16701-1726	Country USA	
Client Contact Last Name Goodling	First Name Jason	MI	Suffix	
Client Contact Title Environmental Manager	Phone 814-368-1223		Ext	
Email Address jgoodling@amref.com	FAX			

SITE INFORMATION

DEP Site ID#	Site Name American Refining Group - Bradford Refinery				
EPA ID#	Estimated Number of Employees to be Present at Site			300 (+/-)	
Description of Site Refinery wastewater treatment plant					
County Name McKean	Municipality City of Bradford	City <input checked="" type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input type="checkbox"/>	State
County Name	Municipality	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input type="checkbox"/>	State
Site Location Line 1 77 North Kendall Avenue		Site Location Line 2			
Site Location Last Line – City Bradford	State PA	ZIP+4 16701-1726			
Detailed Written Directions to Site Route 219 to Kendall Avenue					
Site Contact Last Name Dodds	First Name Richard	MI B.	Suffix		
Site Contact Title Environmental Consultant	Site Contact Firm Hill Engineering, Inc.				
Mailing Address Line 1 8 Gibson Street		Mailing Address Line 2			
Mailing Address Last Line – City North East	State PA	ZIP+4 16428			

Phone 814-725-8659	Ext	FAX 814-725-3867	Email Address rdodds@heiengr.com
NAICS Codes (Two- & Three-Digit Codes – List All That Apply)			6-Digit Code (Optional) 324110
Client to Site Relationship OWNOP			

FACILITY INFORMATION

Modification of Existing Facility				Yes	No
1. Will this project modify an existing facility, system, or activity?				<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will this project involve an addition to an existing facility, system, or activity?				<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "Yes", check all relevant facility types and provide DEP facility identification numbers below.</i>					
Facility Type	DEP Fac ID#	Facility Type	DEP Fac ID#		
<input type="checkbox"/> Air Emission Plant		<input type="checkbox"/> Industrial Minerals Mining Operation			
<input type="checkbox"/> Beneficial Use (water)		<input type="checkbox"/> Laboratory Location			
<input type="checkbox"/> Blasting Operation		<input type="checkbox"/> Land Recycling Cleanup Location			
<input type="checkbox"/> Captive Hazardous Waste Operation		<input type="checkbox"/> MineDrainageTrmt/LandRecyProjLocation			
<input type="checkbox"/> Coal Ash Beneficial Use Operation		<input type="checkbox"/> Municipal Waste Operation			
<input type="checkbox"/> Coal Mining Operation		<input type="checkbox"/> Oil & Gas Encroachment Location			
<input type="checkbox"/> Coal Pillar Location		<input type="checkbox"/> Oil & Gas Location			
<input type="checkbox"/> Commercial Hazardous Waste Operation		<input type="checkbox"/> Oil & Gas Water Poll Control Facility			
<input type="checkbox"/> Dam Location		<input type="checkbox"/> Public Water Supply System			
<input type="checkbox"/> Deep Mine Safety Operation -Anthracite		<input type="checkbox"/> Radiation Facility			
<input type="checkbox"/> Deep Mine Safety Operation -Bituminous		<input type="checkbox"/> Residual Waste Operation			
<input type="checkbox"/> Deep Mine Safety Operation -Ind Minerals		<input type="checkbox"/> Storage Tank Location			
<input type="checkbox"/> Encroachment Location (water, wetland)		<input checked="" type="checkbox"/> Water Pollution Control Facility			
<input type="checkbox"/> Erosion & Sediment Control Facility		<input type="checkbox"/> Water Resource			
<input type="checkbox"/> Explosive Storage Location		<input type="checkbox"/> Other:			
Latitude/Longitude Point of Origin		Latitude		Longitude	
	Degrees	Minutes	Seconds	Degrees	Minutes
Discharge Point	41	57	59	78	37
Horizontal Accuracy Measure	Feet		--or--	Meters	
Horizontal Reference Datum Code	<input checked="" type="checkbox"/> North American Datum of 1927 <input type="checkbox"/> North American Datum of 1983 <input type="checkbox"/> World Geodetic System of 1984				
Horizontal Collection Method Code	SURVEY				
Reference Point Code	CNTR				
Altitude	Feet		1425	--or--	Meters
Altitude Datum Name	<input checked="" type="checkbox"/> The National Geodetic Vertical Datum of 1929 <input type="checkbox"/> The North American Vertical Datum of 1988 (NAVD88)				
Altitude (Vertical) Location Datum Collection Method Code	SURVEY				
Geometric Type Code	POINT				
Data Collection Date	March 2011				
Source Map Scale Number	1	Inch(es)	=	2000	Feet
	--or--	Centimeter(s)	=		Meters

PROJECT INFORMATION

Project Name NPDES Permit Amendment			
Project Description Addition of Chlorination/Disinfection System to Industrial Wastewater Treatment Plant			
Project Consultant Last Name Dodds	First Name Richard	MI B	Suffix
Project Consultant Title Environmental Consultant		Consulting Firm Hill Engineering, Inc.	
Mailing Address Line 1 8 Gibson Street		Mailing Address Line 2	
Address Last Line – City North East		State PA	ZIP+4 16428

Phone 814-725-8659	Ext	FAX 814-725-3867	Email Address rdodds@heiengr.com
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Time Schedules	Project Milestone (Optional)

1. Have you informed the surrounding community and addressed any concerns prior to submitting the application to the Department? ☒ Yes ☐ No

2. Is your project funded by state or federal grants? ☐ Yes ☒ No

Note: If "Yes", specify what aspect of the project is related to the grant and provide the grant source, contact person and grant expiration date.

Aspect of Project Related to Grant

Grant Source: _____

Grant Contact Person: _____

Grant Expiration Date: _____

3. Is this application for an authorization on Appendix A of the Land Use Policy? (For referenced list, see Appendix A of the Land Use Policy attached to GIF instructions) ☐ Yes ☒ No

Note: If "No" to Question 3, the application is not subject to the Land Use Policy.

If "Yes" to Question 3, the application is subject to this policy and the Applicant should answer the additional questions in the Land Use Information section.

LAND USE INFORMATION

Note: Applicants are encouraged to submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances.

1. Is there an adopted county or multi-county comprehensive plan? ☒ Yes ☐ No

2. Is there an adopted municipal or multi-municipal comprehensive plan? ☒ Yes ☐ No

3. Is there an adopted county-wide zoning ordinance, municipal zoning ordinance or joint municipal zoning ordinance? ☒ Yes ☐ No

Note: If the Applicant answers "No" to either Questions 1, 2 or 3, the provisions of the PA MPC are not applicable and the Applicant does not need to respond to questions 4 and 5 below.

If the Applicant answers "Yes" to questions 1, 2 and 3, the Applicant should respond to questions 4 and 5 below.

4. Does the proposed project meet the provisions of the zoning ordinance or does the proposed project have zoning approval? If zoning approval has been received, attach documentation. ☒ Yes ☐ No

5. Have you attached Municipal and County Land Use Letters for the project? ☐ Yes ☒ No

COORDINATION INFORMATION

Note: The PA Historical and Museum Commission must be notified of proposed projects in accordance with DEP Technical Guidance Document 012-0700-001 and the accompanying Cultural Resource Notice Form.

If the activity will be a mining project (i.e., mining of coal or industrial minerals, coal refuse disposal and/or the operation of a coal or industrial minerals preparation/processing facility), respond to questions 1.0 through 2.5 below.

If the activity will not be a mining project, skip questions 1.0 through 2.5 and begin with question 3.0.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0. (DEP Use/48y1)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.1	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be equal to or greater than 200 tons/day? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.2	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be greater than 50,000 tons/year? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/ processing activities in which thermal coal dryers or pneumatic coal cleaners will be used? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters? (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.5	Will this coal mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet? (DEP Use/3140)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well? (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0. (DEP Use/48y1)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.2	Will this non-coal (industrial minerals) mining project involve the crushing and/or screening of sand and gravel with the exception of wet sand and gravel operations (screening only) and dry sand and gravel operations with a capacity of less than 150 tons/hour of unconsolidated materials? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	Will this non-coal (industrial minerals) mining project involve the construction, operation and/or modification of a portable non-metallic (i.e., non-coal) minerals processing plant under the authority of the General Permit for Portable Non-metallic Mineral Processing Plants (i.e., BAQ-PGPA/GP-3)? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters? (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.5	Will this non-coal (industrial minerals) mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet? (DEP Use/3140)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

3.0	Will your project, activity, or authorization have anything to do with a well related to oil or gas production, have construction within 200 feet of, affect an oil or gas well, involve the waste from such a well, or string power lines above an oil or gas well? If "Yes", respond to 3.1-3.3. If "No", skip to Question 4.0. (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
3.1	Does the oil- or gas-related project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water (including wetlands)? (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.2	Will the oil- or gas-related project involve discharge of industrial wastewater or stormwater to a dry swale, surface water, ground water or an existing sanitary sewer system or storm water system? If "Yes", discuss in <i>Project Description</i> . (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.3	Will the oil- or gas-related project involve the construction and operation of industrial waste treatment facilities? (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0	Will the project involve a construction activity that results in earth disturbance? If "Yes", specify the total disturbed acreage. (DEP Use/4x66)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
4.0.1	Total Disturbed Acreage				
5.0	Does the project involve any of the following? If "Yes", respond to 5.1-5.3. If "No", skip to Question 6.0. (DEP Use/4x10)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.1	Water Obstruction and Encroachment Projects – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water? (DEP Use /4x10).	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.2	Wetland Impacts – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a wetland? (DEP Use/4x10).	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.3	Floodplain Projects by the commonwealth, a Political Subdivision of the commonwealth or a Public Utility – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a floodplain? (DEP Use /4x10).	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.0	Will the project involve discharge of stormwater or wastewater from an industrial activity to a dry swale, surface water, ground water or an existing sanitary sewer system or separate storm water system? (DEP Use/4x62)	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities? (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	Will the project involve construction of sewage treatment facilities, sanitary sewers, or sewage pumping stations? If "Yes", indicate estimated proposed flow (gal/day). Also, discuss the sanitary sewer pipe sizes and the number of pumping stations/treatment facilities/name of downstream sewage facilities in the <i>Project Description</i> , where applicable. (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0.1	Estimated Proposed Flow (gal/day)				
9.0	Will the project involve the subdivision of land, or the generation of 800 gpd or more of sewage on an existing parcel of land or the generation of an additional 400 gpd of sewage on an already-developed parcel, or the generation of 800 gpd or more of industrial wastewater that would be discharged to an existing sanitary sewer system? (DEP Use/4x61).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
9.0.1	Was Act 537 sewage facilities planning submitted and approved by DEP? If "Yes" attach the approval letter. Approval required prior to 105/NPDES approval.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	Is this project for the beneficial use of biosolids for land application within Pennsylvania? If "Yes" indicate how much (i.e. gallons or dry tons per year). (DEP Use/4X62)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
10.0.1	Gallons Per Year (residential septage)				
10.0.2	Dry Tons Per Year (biosolids)				

11.0	Does the project involve construction, modification or removal of a dam? If "Yes", identify the dam. (DEP Use/3140)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
11.0.1	Dam Name				
12.0	Will the project interfere with the flow from, or otherwise impact, a dam? If "Yes", identify the dam. (DEP Use/3140)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
12.0.1	Dam Name				
13.0	Will the project involve operations (excluding during the construction period) that produce air emissions (i.e., NOX, VOC, etc.)? If "Yes", identify each type of emission followed by the amount of that emission. (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
13.0.1	Enter all types & amounts of emissions; separate each set with semicolons.				
14.0	Does the project include the construction or modification of a drinking water supply to serve 15 or more connections or 25 or more people, at least 60 days out of the year? If "Yes", check all proposed sub-facilities. (DEP Use/4x81)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
14.0.1	Number of Persons Served				
14.0.2	Number of Employee/Guests				
14.0.3	Number of Connections				
14.0.4	Sub-Fac: Distribution System	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.5	Sub-Fac: Water Treatment Plant	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.6	Sub-Fac: Source	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.7	Sub-Fac: Pump Station	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.8	Sub Fac: Transmission Main	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.9	Sub-Fac: Storage Facility	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
15.0	Will your project include infiltration of storm water or waste water to ground water within one-half mile of a public water supply well, spring or infiltration gallery? (DEP Use/4x81) and 4x52).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
16.0	Is your project to be served by an existing public water supply? If "Yes", indicate name of supplier and attach letter from supplier stating that it will serve the project. (DEP Use/4x81)	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
16.0.1	Supplier's Name City of Bradford				
16.0.2	Letter of Approval from Supplier is Attached	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
17.0	Will this project involve a new or increased drinking water withdrawal from a stream or other water body? If "Yes", should reference both Water Supply and Watershed Management. (DEP Use/4x81 and 4x10)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
17.0.1	Stream Name				
18.0	Will the construction or operation of this project involve treatment, storage, reuse, or disposal of waste? If "Yes", indicate what type (i.e., hazardous, municipal (including infectious & chemotherapeutic), residual) and the amount to be treated, stored, re-used or disposed. (DEP/Use4x32)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
18.0.1	Type & Amount				
19.0	Will your project involve the removal of coal, minerals, etc. as part of any earth disturbance activities? (DEP Use/48y1)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
20.0	Does your project involve installation of a field constructed underground storage tank? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
20.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
21.0	Does your project involve installation of an aboveground storage tank greater than 21,000 gallons capacity at an existing facility? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0.1	Enter all substances & capacity of each; separate each set with semicolons.				

- 22.0 Does your project involve installation of a tank greater than 1,100 gallons which will contain a highly hazardous substance as defined in DEP's Regulated Substances List, 2570-BK-DEP2724? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570) ☐ Yes ☒ No
- 22.0.1 Enter all substances & capacity of each; separate each set with semicolons.
- 23.0 Does your project involve installation of a storage tank at a new facility with a total AST capacity greater than 21,000 gallons? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570) ☐ Yes ☒ No
- 23.0.1 Enter all substances & capacity of each; separate each set with semicolons.
- 24.0 Will the intended activity involve the use of a radiation source? (DEP Use/4x90). ☐ Yes ☒ No

CERTIFICATION

I certify that I have the authority to submit this application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information.

Type or Print Name Richard B. Dodds, Hill Engineering, Inc.

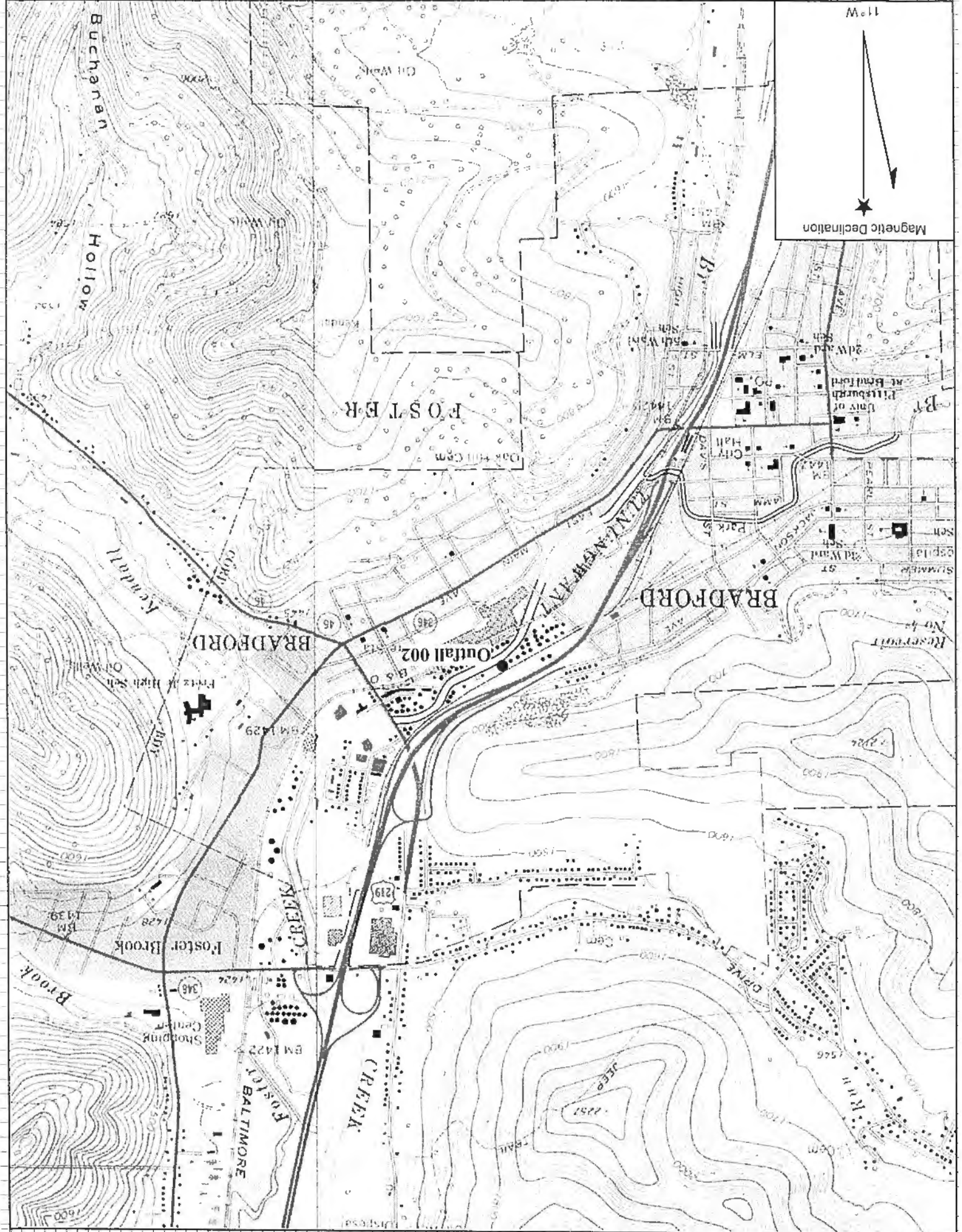
Signature

Environmental Consultant

Title

10-14-11
Date

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HILL ENGINEERING, INC.

8 GIBSON STREET NORTH EAST, PENNSYLVANIA 16428

(814) 725-8659 FAX: (814) 725-3867

Registered Engineers & Surveyors - Pennsylvania - New York - Ohio

RECEIVED

September 8, 2011

SEP 13 2011

**VIA CERTIFIED MAIL
RETURN RECEIPT**

HILL ENGINEERING, INC.

City of Bradford
City Hall
24 Kennedy Street
Bradford, PA 16701

Reference: Act 14 Notification
Amendment -- NPDES Permit No. PA0002674
American Refining Group, Inc.

Dear City Officials:

Pursuant to PA Act 14, this is to notify you that American Refining Group, Inc., will be submitting a permit application for the amendment of its NPDES Permit No. PA0002674 for the discharge of treated effluent from its existing wastewater treatment facility.

Please indicate your receipt of this notice by signing below and returning to our office.

If you have any questions, please call me.

Sincerely,

HILL ENGINEERING, INC.

Richard B. Dodds

The above notice was received on September 12, 2011 by _____
(date)

John W. Peterson
(Name of Authorized Representative)

City Clerk
(Title)

John W. Peterson
Signature



HILL ENGINEERING, INC.

8 GIBSON STREET NORTH EAST, PENNSYLVANIA 16428

(814) 725-8659

FAX: (814) 725-3867

Registered Engineers & Surveyors - Pennsylvania -- New York -- Ohio

September 8, 2011

**VIA CERTIFIED MAIL
RETURN RECEIPT**

McKean County Commissioners
500 W. Main Street
Smethport, PA 16749

Reference: Act 14 Notification
Amendment – NPDES Permit No. PA0002674
American Refining Group, Inc.

Dear Commissioners:

Pursuant to PA Act 14, this is to notify you that American Refining Group, Inc. will be submitting a permit application for the amendment of its NPDES Permit No. PA0002674 for the discharge of treated effluent from its existing wastewater treatment facility.

Please indicate your receipt of this notice by signing below and returning to our office.

If you have any questions, please call me.

Sincerely,

HILL ENGINEERING, INC.

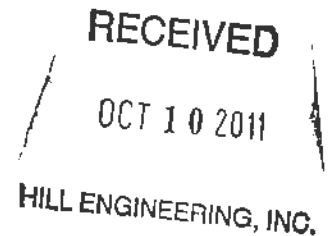
Richard B. Dodds

The above notice was received on 9-9-11 by _____
(date)

Al Pingie
(Name of Authorized Representative)

McKean County Commissioner
(Title)

Al Pingie
Signature





pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

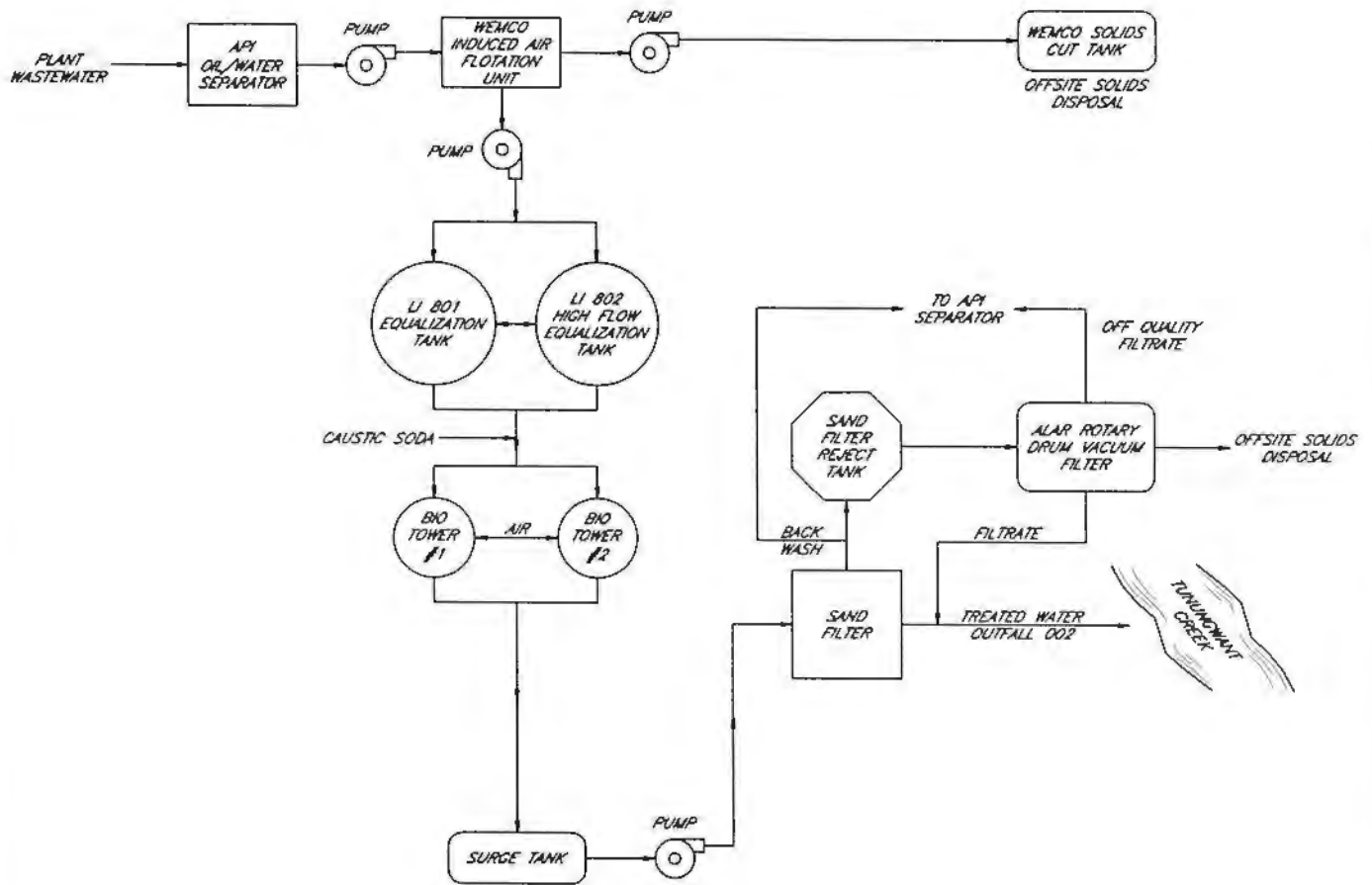
Applicant Name: American Refining Group, Inc.

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATER STANDARDS AND FACILITY REGULATION

WASTEWATER TREATMENT TECHNOLOGIES

MODULE 2

[illegible]



EXISTING FLOW SCHEMATIC

NOT TO SCALE

REVISIONS		
NO.	DESCRIPTION	DATE

AMERICAN REFINING GROUP, INC.

CITY OF BRADFORD, WARREN COUNTY, PENNSYLVANIA

WASTEWATER TREATMENT IMPROVEMENTS

EXISTING FLOW SCHEMATIC

HILL ENGINEERING, INC.

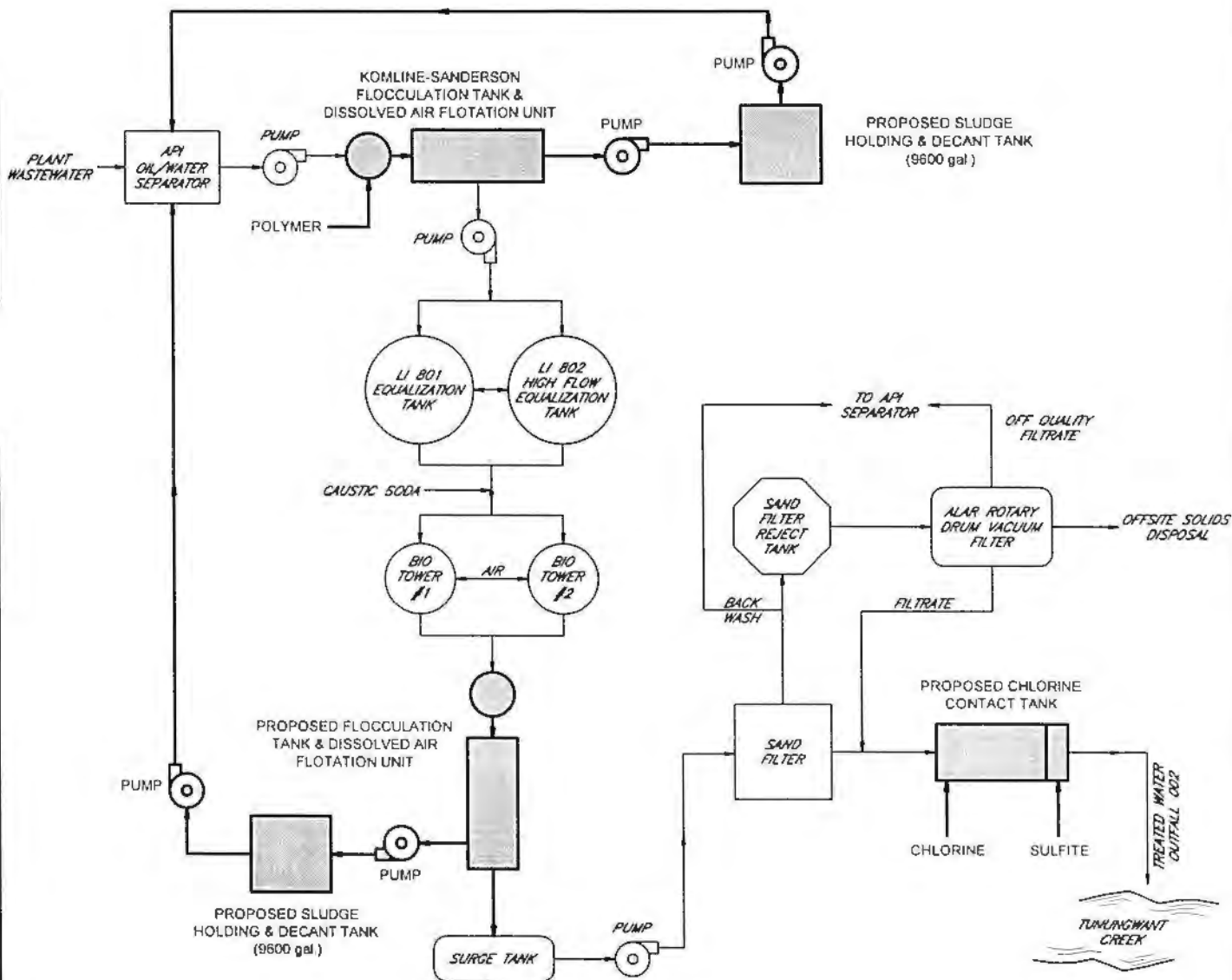
NORTH EAST, PENNSYLVANIA

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Flow Schematic.dwg



DRAWN BY	KPT	CHKD	SCALE	NOT TO SCALE	DRAWING NO.
TRACED		APPVD	DATE	OCTOBER 2011	EX-1



PROPOSED FLOW SCHEMATIC

NOT TO SCALE

REVISIONS		
NO.	DESCRIPTION	DATE

AMERICAN REFINING GROUP, INC.

CITY OF BRADFORD, WARREN COUNTY, PENNSYLVANIA

WASTEWATER TREATMENT IMPROVEMENTS

PROPOSED FLOW SCHEMATIC

HILL ENGINEERING, INC.

NORTH EAST, PENNSYLVANIA

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Civil3DPro/92111101
Flow Schematic.dwg



DESIGNED BY	KPT	DATE	SCALE	NOT TO SCALE	DRAWING NO.
REVIEWED BY		DATE			

PR-1